

REVENUE EMPLOYEE REGISTRATION FORM

KENTUCKY PROPERTY TAX AND IAAO COURSES

APPROVAL (Supervisor) _____

APPROVAL (Executive Director) _____

(Classes outside of Frankfort require the Executive Director's approval.)

Course: _____

Date: _____ **Location:** _____

Student information:

_____	_____	Please check this box if this class is needed for designation this year. <input type="checkbox"/>
Name	Email address	
_____	_____	Please check this box if this class is needed for designation this year. <input type="checkbox"/>
Name	Email address	
_____	_____	Please check this box if this class is needed for designation this year. <input type="checkbox"/>
Name	Email address	
_____	_____	Please check this box if this class is needed for designation this year. <input type="checkbox"/>
Name	Email address	

Work Phone: _____ **Fax:** _____

Please contact Robert Vick at (502) 564-7180 if you have any questions.

Registrations may be emailed to
Robert.Vick@ky.gov or faxed to (502) 564-8368.